The Benefits of Steroid Testing in Public High Schools
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Doping has become a problem in schools nationwide; therefore, education coupled with mandatory testing of all student athletes is necessary to curb steroid abuse.

Traditionally, steroid and performance enhancing drug use was perceived as a problem related to professional athletes. Today doping occurs in schools, thereby posing significant health risks to students. This article will demonstrate that public secondary schools should adopt a steroid testing policy for student athletes, in addition to implementing mandatory education for all students. Student athletes are more susceptible to steroid use and so testing this group, as opposed to all students, is more reasonable and financially feasible. Further, sports are voluntary so individuals who refuse testing can choose not participate. Specifically, this article will demonstrate that steroid testing is both constitutional and beneficial for the health of students. In light of Supreme Court precedent, steroid testing is constitutional due to the government’s justified interest in deterring usage. The immediacy and nature of this concern outweighs any intrusion on a student's legitimate expectation of privacy. Ultimately, organized policies, testing and developmentally appropriate health curriculum will bring awareness of risks, deter usage, and protect the health and safety of students. Consequently, healthier students will be more academically successful and less likely to engage in dangerous behaviors.

Doping as defined for purposes of this paper includes the trafficking, use, or assistance in use of prohibited substances or methods to enhance performance. Prohibited substances include anabolic steroids, various hormones, or use of any drug for an unintended purpose. The most common orally digested steroids are anadrol (oxymetholone), oxandrin, dionabol, and winstrol. Steroids are also injectable, the most
common of which are deca-durabolin, durabolin, dep-testosterone, and equipoise.¹ The long-term consequences of doping can include increasingly bad levels of cholesterol, higher susceptibility to strokes and heart problems, liver disease, obstructive sleep apnea, fetal effects, jaundice, and increased aggressiveness.² Despite these risks, according to the Center for Disease Control and Prevention (CDC), steroid use among high school students has more than doubled between 1991 and 2003. More than 6% of 15,000 students surveyed admitted trying steroid pills or injections.³ Recent data from the National Institute on Drug Abuse (NIDA) shows that in 2010 at least 1% of all 10th and 12th graders abused anabolic steroids.⁴ Against the base of millions of children in these grades, this number is significant. The NIDA also found that although males are the dominant users, females also use performance enhancing and weight altering drugs.⁵ Students who participate in athletic competition are at the highest risk for doping.⁶ Despite this problem, the National Federation of State High School Associations (NFHS) found that only 13% of high schools have a policy in place for drug testing students. Using various methods, 63% of these schools test only student-athletes, while 20% test all students.⁷ Only less than 4% of high schools specifically conduct steroid testing.⁸

**Testing should be funded on a national and state level, but must be organized and enforced by local public school boards.**

An immediate need for testing exists, yet there is a question as to whether it should be mandated and funded on a national, state, or local level. The Federal Department of Education is minimally involved in public education, but has highlighted drug abuse as a national problem in schools. The American Alliance for Health, Physical Education, Recreation, and Dance, an alliance of six national associations, six district associations and a research consortium, has established national standards for health
education, and drug use is one of six highlighted areas.\textsuperscript{x} The CDC has also identified drug use as cause for concern in schools.\textsuperscript{x} Despite guidelines for drug abuse, thus far, no national standards have been set for doping. Nonetheless, steroid use is similar to that of drug abuse in that it is an unhealthy, dangerous and illegal activity. Therefore, national policies for steroids should be adopted. In fact, doping must be addressed on both a national and state level. Specifically, states should establish general compulsory education and health requirements and provide financial incentives and guidelines to districts for steroid testing. Ultimately, however, testing, policies, and curriculum must be organized and conducted on a local level by school administrators. Ideally, local collaboration among an active community, governing board, educators, parent groups, and health professionals, can lead to development of effective policies tailored to the needs of individual schools. This is a realistic goal if states provide support.

With no national mandate several states have tried various methods to curb doping; others avoid it altogether. Some states impose guidelines regarding policies, but do not compel testing. For example, Pennsylvania requires school boards to enforce rules prohibiting steroid use. Similarly, Virginia imposes a two-year ban of athletic participation if a principal determines doping has occurred. Few states go so far as to test students. Of those state initiatives that test, some have failed. In Connecticut, a survey conducted in 2009 revealed that 2.7\% of students have used steroids.\textsuperscript{xi} Consequently, the Connecticut Interscholastic Athletic Conference attempted to implement a steroid testing program but ultimately could not garner support from the state legislature. Thus, the state has left it up to local municipalities to employ programs but so far, few have done so. In Florida, independent surveys estimate 1.5\%
to 2% of high school athletes might be using steroids. Florida implemented a pilot program to test 1% of football and basketball student athletes, but in 2009, after only one year, pulled funding of the program.

Some states have been more successful due to commitment of resources. For example, New Jersey is proactive about testing. In 2006, it became the first state to conduct random steroid testing of high school athletes. Each year the NJSIAA contributes $50,000 to randomly tests 500 student athletes who participate in state tournament games. Athletes who test positive for any of over 80 banned substances, including anabolic steroids, certain diuretics and other performance-enhancing drugs, face a one-year loss of eligibility. State representatives and officials from the NJSIAA want to continue testing, asserting it acts as a deterrent. For such a small sum of money, this brings awareness and prevention. Whereas this is a productive initial step, testing at random times of the year of all athletes participating on a school team will serve as a greater deterrent. If any student athlete may be subject to testing at any time, they will be more fearful of being caught, and therefore, less likely to engage in the activity. Accordingly, states need to set guidelines and assist with funding in order to incentivize districts to test high school athletes and establish policies tailored to the needs of individual schools.

School is a primary context for childhood development and as such, educators must understand problems and pressures students face in order to effectively address issues like doping.

In order to identify effective solutions, high school educators need to first understand the problems student’s face. In the case of doping, it is important to recognize motivations, so as to successfully deter use and provide awareness. During adolescence,
many physiological and cognitive changes occur and teenagers begin to explore new
situations and responsibilities.\textsuperscript{XV} Moreover, the media imposes societal expectations via
exposure to images of violence, sex, drug and alcohol use, gender stereotypes and
unattainable body images. Combined with peer pressure, this has contributed to national
increases of student involvement in risky activities, including substance abuse.\textsuperscript{XVI} Social,
cultural, and economic factors can influence behaviors and place students at greater risk
for certain health problems. Accordingly, schools must take external factors into
consideration. For example, schools need to be aware that teenagers from affluent areas
are particularly susceptible to steroid use. This is partly attributed to the fact that illicit
drugs are more accepted in wealthy areas and also because of the sense of invincibility
due to economic status. Additionally, socioeconomically advantaged students can more
readily afford steroids. Students can easily obtain substances online and from fellow
schoolmates, local dealers, and sometimes even parents. This accessibility and sense of
entitlement is most effectively tackled by the threat of testing.

Another inducement to doping includes physical benefits. Students discuss and
share information in school weight rooms, locker rooms and cafeterias.\textsuperscript{XVII} In many
instances substances increase protein synthesis, decrease the catabolic effect of muscle
tearing, and increases exercise tolerance.\textsuperscript{XVIII} Often a student’s athletic ability can lead to
acceptances and scholarships to nationally recognized universities.\textsuperscript{XIX} Additionally, the
competitive nature of high school sports, coupled with pressure from coaches, parents
and peers to excel can lead many students to look to performance enhancing substances
to improve their abilities.\textsuperscript{XX} Students are also more likely to take diuretics and hormone
substances if they have taken steroids.\textsuperscript{XXI} Youths are drawn to substances to improve
appearance and lose weight. Benefits to a popular hormone, the Human Growth Hormone, includes intracellular breakdown of body fat, synthesis of protein and the inhibiting of glucose utilization, thereby helping a person to lose weight and build muscle.\textsuperscript{xxii} Like steroids, serious risks are involved with body altering hormones.\textsuperscript{xxiii} 

\textbf{Testing will bring awareness to youths about the dangerous side effects and long-term health implications of doping.}

Regardless of benefits, most youths are unaware of the potential dangers and cumulative nature of anabolic steroids and hormones. Performance enhancing substances often give rise to unhealthy side effects and irreversible long-term implications. For example, vanadium, a mild anabolic steroid, causes enhanced muscle strength and is easily obtained online. What is unknown are the potential long-term effects including kidney damage and diabetes, especially if dosages are abused. Another example, androstenedione, famous for its use by Mark Maguire, is a steroid hormone used to produce testosterone and estrogen.\textsuperscript{xxiv} It can enhance athletic performance, increase energy, enhance recovery and growth from exercise, and increase sexual desire and performance. However, this substance is banned due to its serious side effects, including higher risk of cancer, heart disease and susceptibility to depression and behavioral changes. In children, it can stop bone growth and lead to shorter adult height, as well as early onset of puberty. Unlike traditional drugs that leave the body after a period of time, steroids including androstenedione and vanadium, have a cumulative effect that can lead to more serious long-term health implications.

Immediate side effects of steroids are also both physically and psychologically harmful. Often, teenagers mistake side effects for symptoms of puberty, but effects are exacerbated. They include acne, excessive hairiness, male pattern baldness, deepening of
the voice, weight gain and altered fat distribution, and in females altered menstrual
cycling, enlargement of the clitoris, and an increased libido. Testing policies are an
efficient way to spread awareness of the risks of doping that are unbeknownst to students.

**Steroid testing, education and policies will foster a better reporting system.**

Some side effects to doping are obvious enough that parents, teachers and coaches
should be able to detect steroid use, but many are uninformed and thus unable to do so.
Others simply turn a blind eye because no policies exist. Some educators are wary of
accusing a student if the school has no protocol, as they can be vulnerable to criticism
from parents and fellow educators. Despite general drug policies, local sports officials,
coaches, and school administrators have been unprepared to reprimand students for
steroid use due to lack of specific rules and procedures. Clear guidelines and a no
tolerance policy will help to establish an effective reporting system. Further, if all student
athletes are tested, it prevents schools from placing educators and coaches in the
precarious position of making accusations. Also, schools cannot be criticized for accusing
certain demographics if all student athletes are tested. Ultimately, if testing is not
conducted, educators and coaches still need the support of schools to address this
problem, and the flexibility to approach students they suspect of using before that student
suffers irreparable harm to his body.

**In light of Supreme Court precedent, schools have a justified and immediate interest in
steroid testing that outweighs a student's right to privacy.**

An argument in opposition to drug testing is that it violates students’
fundamental rights. Although students have rights, they are not absolute. In 1969, the
United States Supreme Court ruled in *Tinker v. Des Moines* that students do not shed
all constitutional rights to freedom of speech and privacy at the schoolhouse gate.
Although this was a landmark case, subsequent cases have qualified this. In *Bethel v. Fraser*, the Supreme Court outlined several limitations to students freedoms, reasoning that student’s rights are not co-extensive with the rights of adults. The Supreme Court also held in the 2007 case of *Morse v. Frederick*, that a school could impose policies and infringe on constitutional rights of students in order to maintain its educational mission or to protect student safety and health. Ultimately, schools are the primary context for childhood development and thereby, are not only the best medium by which to deter substance abuse, but are also responsible for protecting student health.

Subsequently, as outlined in several Supreme Court decisions, steroid testing is constitutional because it is minimally intrusive and leads to deterrence, which is an immediate and valid governmental interest that outweighs the student’s legitimate expectation of privacy and freedoms. In the case of *Veronia School District v. Acton* the Supreme Court balanced individual rights and the governmental interest of random drug testing of high school athletes. An Oregon School District adopted a Student Athlete Drug Policy authorizing random urinalysis drug testing of student athletes due to concern of substance abuse. The Supreme Court held that because students are under state supervision during school hours, they are subject to greater control than adults and therefore, intrusion upon privacy is reasonable for furthering the District’s legitimate interest in preventing drug use. Additionally, privacy concerns regarding urine samples are negligible since collection occurs in an area similar to a public restroom and only authorized personnel view results.

The Supreme Court expounded upon *Veronia* in *Board of Education v. Earls*. The Student Activities Drug Testing Policy adopted by an Oklahoma School District required
all middle and high school students to consent to urinalysis testing for drugs in order to participate in extracurricular activities. A suit was brought forth alleging violation of the Fourth Amendment. The Supreme Court held that these schools had a legitimate interest in requiring all students participating in extracurricular activities to submit to drug testing, and that this was only minimally intrusive on student’s limited privacy rights.xxxii As a result, the Fourth Amendment was not violated. Additionally, the Supreme Court held in Hill v. NCAA that even at the collegiate level, a student-athlete’s reasonable expectation of privacy is diminished.xxxiii The NCAA’s drug-testing program was constitutional and, moreover, the court permitted it as sound public policy since the NCAA has a legitimate interest in safeguarding intercollegiate athletic competition.xxxiv Since students’ rights are diminished even at the collegiate level, they can and should be limited during primary and secondary education.

These Supreme Court holdings emphasize that students have a diminished expectancy of privacy and that drug policies are “a reasonable means of furthering the School District’s important interest in preventing and deterring drug use among its schoolchildren.” Steroids, similar to other drugs, are not only unhealthy, but also illegal. Thus, public policy favors preventing steroid use via testing. Despite precedent, public high schools hesitate to test students due to criticism from parents and lack of resources.

Some parents argue that because of the fundamental right to the custody, control and care of children, testing should not be done without their consent. However, parents’ rights are not absolute in contest with the rights of schools. Currently there is no case or statutory law explicitly addressing this issue in the context of steroid testing. However, due to schools’ legitimate interest and constitutional ability to exert control over students,
it can be inferred this outweighs a parent’s interest in demanding consent. Nevertheless, schools should seek permission from parents for drug testing of their children as a legal safety maneuver. If a parent refuses to sign the form, a school can prevent the student from participating in the voluntary athletic activity.

Mandatory testing of student athletes is more financially feasible than testing all students and is the most effective strategy to deterrence, however, if there is inadequate funding, schools have alternatives.

Another challenge to testing is sufficient allocation of resources. States such as Florida, Illinois, and Texas have tried implementing a comprehensive steroid testing program but due to budgetary restraints, abandoned efforts. More funding from the state and national level will spur districts to conduct testing. Without additional funding, many districts are already strained financially and assert that steroid testing is too costly. Thus, this article suggests only student athletes be tested, as they are at higher risk of steroid abuse and it is not only more reasonable but also financially feasible to exclusively test this group. An alternative to mandatory testing of all student athletes, especially for larger high schools, is to impose random testing of all students, which is less costly due to its infrequency. To reduce costs further, schools could randomly test only the student athletes or students engaging in extracurricular activities. Yet another method is to only test those suspected of doping. However, certain students may feel targeted, which can open the school to potential litigation, especially if accusations prove false. Ideally, all student-athletes should be tested, as to ensure doping does not occur, and so that schools do not become vulnerable to criticism or litigation for targeting the testing.

Despite the potential benefits of testing, schools have other alternatives if
testing is too expensive altogether. Improved health programs and education geared
towards students is constructive. Currently, most health education programs outline the
risks of traditional illicit drug use with no mention of steroid use. xxxvii As previously
discussed, students are ignorant of the dangers of doping, thus schools are the best
medium to raise awareness. If perception of risk is higher, students will be less likely to
engage in the risky behavior. Specific educational programming targeted towards
student athletic teams would be especially beneficial as athletes are more likely to use
steroids, hormones, and other body altering substances. Coaches should also initiate a
dialogue with teams regarding risks and consequences. Ideally, education coupled with
testing is the most effective way to deter usage. As previously discussed, student
athletes who live in affluent areas are typically at greater risk of steroid and
performance enhancing substance abuse. These communities have more resources,
thus, costs cannot excuse lack of steroid testing and education.

Doping poses significant risks to both users and those in contact with users, thus
schools have a responsibility to acknowledge this problem.

Though doping may not be considered as widespread as other illicit drug use,
risks are still high. Abuse of anabolic steroids or hormones can result in life long health
complications, and if used at an early age, may lead to patterns of long-term use and
other unhealthy behaviors through adulthood. Steroid use is a gateway into other drugs
and illegal substances. xxxviii Additionally, young athletes not only expose themselves to
health risks, but endanger peers as well. Other students are vulnerable because steroid
use can cause uncontrollable aggression, which leads to physical violence. xxxix Also,
steroid users become bigger, stronger and more aggressive, potentially injuring other
athletes during training, practice and competition. xl As of 2010 nearly 7 million high
school students participate in sports and among this group a reported 715,000 sports-related injuries occur each year, with approximately 8,000 treated in emergency rooms each day.\textsuperscript{xli} Recently more catastrophic injuries are occurring and resulting in death. Yet, there is no protocol to test the body’s toxicity for steroids.\textsuperscript{xlii} Often, autopsies are inconclusive or state death was due to a cardiac arrhythmia – not coincidentally, a side effect of steroids – and so health professionals are not determining cause.\textsuperscript{xliii} It is naïve to think steroids are unrelated to these injuries and deaths; acknowledgement of the problem coupled with testing and education will prevent many of these incidences.

\textit{Conclusion}

Despite lack of consensus as to how to address doping, something must be done, particularly on a local level. All public high schools should test student athletes, but at the very least should provide education. Testing athletes is more financially feasible than testing all students and is constitutional in light of Supreme Court precedent. If a parent or student vehemently opposes testing, that student can refrain from participating in sports. Public policy favors prevention, therefore, communities need to support a firm policy for steroid testing and educational programming.
ENDNOTES


2 Id.


4 Steroid Abuse: A guide for Understanding Steroids and Related Substances, US DEPT OF JUSTICE, available at http://www.deadiversion.usdoj.gov/pubs/brochures/steroids-/professionals/ (There is insufficient data to determine exact numbers due to lack of testing, but sources suggest these numbers are in fact probably higher).


6 Id.


8 Id.


12 Id.


17 Id.


19 Id.


22 Id.

23 Id.

24 http://www.webmd.com/vitamins-supplements/ingredientmono-780-ANDROSTENEDIONE.aspx?activeIngredientId=780&activeIngredientName=ANDROSTENEDIONE


26 Id.

27 Interview Anne Aquila, Weston High School Health Educator, Mar. 18, 2011.

28 Interview Anne Aquila, Weston High School Health Educator, Mar. 18, 2011.


xxx (CITE_ Bd of ed. V. Earls)
xxxiv Hill v. NCAA, 7 Cal 4th 1 (1994).
xxxv Hill v. NCAA, 7 Cal 4th 1 (1994).
xxxi Interview Anne Aquila, Weston High School Health Educator, Mar. 18, 2011.
xxxi Interview Anne Aquila, Weston High School Health Educator, Mar. 18, 2011.
xxxi Interview Dr. Jerrold B. Leikin, Medical Examiner, Mar. 21, 2011.
xii Interview Dr. Jerrold B. Leikin, Medical Examiner, Mar. 21, 2011.
xii Interview Dr. Jerrold B. Leikin, Medical Examiner, Mar. 21, 2011.
xii Id.